

2016 SECNAV ANNUAL INNOVATION AWARDS NOMINATION FORM

Office Use (Leave Blank)

AWARD CATEGORY:

PART I: ADMINISTRATIVE INFORMATION

A) PROJECT/ACCOMPLISHMENT TITLE: *Short descriptive title of the project or accomplishment.*

B) ORGANIZATION, ACTIVITY, OR STATION: *Unit, ship, battalion, squadron etc... include Official Mailing Address*

Address Line 1:

Address Line 2:

City:

State:

Zip Code:

C) INDIVIDUAL/TEAM: *Choose an item.*

D) INDIVIDUAL NOMINEE/TEAM LEADER:

Grade:

Full Name:

Title:

Phone Number:

Email Address:

E) TEAM DETAILS. (OMIT IF INDIVIDUAL NOMINATION) NAME OF ALL NOMINEE TEAM MEMBERS, INCLUDING A BRIEF STATEMENT OF CONTRIBUTIONS, DUTIES, AND RESPONSIBILITIES FOR EACH TEAM MEMBER
List each Team Member: including Title; Grade/Rank; Full Names; Separate individual entries in a new line.

F) ORIGINATOR (MAY BE ANY GRADE OR RANK):

Grade:

Full Name:

Phone Number:

Email Address:

Sign:

G) ENDORSER (OPTIONAL; MAY BE ANY GRADE OR RANK):

Grade:

Full Name:

Phone Number:

Email Address:

Sign:

H) VERIFIER (MUST BE O-5 COMMANDING OFFICER, OR ANY O-6/GS-15 OR HIGHER; FOR ENLISTED INNOVATOR NOMINATIONS, MUST BE ANY E-9/E-8):

Grade:

Full Name:

Phone Number:

Email Address:

Sign:

PART II: INNOVATION MERIT AND OPERATIONAL IMPACT

(UNCLASSIFIED ONLY. If submitting a classified nomination form, see Instruction #5)

A) INNOVATION MERIT (NO MORE THAN 450 WORDS):

*Describe the results of the specific innovation initiative and how it affected local, service-wide, or Departmental operations. What action changed established procedures, especially by introducing new methods, ideas, or products to solve problems? Please identify any quality reflecting particular improvements, especially receiving praise or reward. **Please, refrain from using individual names.***

B) OPERATIONAL IMPACT (NO MORE THAN 450 WORDS):

Describe how and to what extent the innovation initiative affected, changed or improved operations. What problem did it solve? What potential does it offer to improve the functioning and activities of the organization? Help us understand how the innovation improved efficiency, effectiveness, or overall mission readiness (Note: may not be quantifiable in financial terms). Please, refrain from using individual names.

PART III: EXECUTIVE SUMMARY

A) EXECUTIVE SUMMARY (NO MORE THAN 200 WORDS):

*(UNCLASSIFIED ONLY. Do not submit a classified EXSUM) Should be a clear, concise overview to brief Senior Executives on the main features of the project/accomplishment. Do not include new material in the Executive Summary, as it will not be presented to the awards committee. **Please, refrain from using individual names.***

INSTRUCTIONS:

1. Nominations for awards may be sponsored or endorsed only by a current DoD civilian employee or Service member. *(In accordance with DoDI 1400.25-V451, November 4, 2013)*
2. The Originator should note:
 - This form must be submitted in its original format. (e.g. Word documents or forms that have been printed and scanned will not be accepted.)
 - Each answer must be completed (except Team List for individual nominations; and Endorser).
 - All entries should be written in sentence case (DO NOT USE UPPERCASE).
 - Submissions that exceed the word limit in Part II will not be accepted.
 - Spell out all acronyms in Part II, as Parts I and III will not be evaluated by the Awards Committee.
 - Applicable supplementary material may be submitted with the nomination, but is not required.
 - Nominations will be evaluated by the Awards Committee solely on Part II and applicable supplementary material.
3. The Originator may forward the form to an Endorser to meet local command desires, but it is not required.
4. The Verifier must be O-5 Commanding Officer; or any O-6/GS-15 or higher (e.g. Director, Department Head, etc...). For the Enlisted Innovator Category nominations, the Verifier must be any E-9 or E-8.
 - The Verifier digitally signs the nomination. This step provides confirmation that the Verifier has read the material and certifies that the submission is complete and accurate.
 - The Verifier may be contacted to provide additional information, to include (but not limited to) the Innovation Merit and Operational Impact. Whichever person (meeting the Rank/Grade requirement) that has the most knowledge of the project should be used as the Verifier, even if the nominee(s) are from different commands.
5. The completed nomination form and any applicable supplementary material are emailed to TO: DON_Innovation@navy.mil with "Innovation Awards Submission" in the subject line. A quick link is provided below:
 - [Innovation Awards Submission](#)

The nomination form and any applicable supplementary material may also be uploaded directly into the Innovation Awards portal at:

 - <https://portal.secnav.navy.mil/cop/nin/2016Awards/>
6. Classified submissions are permissible. Submit the award nomination form(s) via NIPR, with Part I and Part III filled out. The comment "Sent via SIPR email" should be used in the "Innovation Merit" and "Operational Impact" fields (and "Brief Statement of Contributions...", if needed). The recommended Citation must be written at an unclassified level, per the awards manual. Once this has been submitted, you may contact DON_Innovation@navy.mil for the SIPR email address.
7. Questions may be submitted to DON_Innovation@navy.mil.
 - FAQs will be posted on the Innovation Awards portal and the DON Innovation website:
 - <http://www.secnav.navy.mil/innovation/pages/awards.aspx>
 - For reference, previous year submissions may be found at the 2015 Innovation Awards portal:
 - <https://portal.secnav.navy.mil/cop/nin/2015Awards/>

Quality Control Checklist:

- ☐ Is the nomination form in its original format?
- ☐ Is there an entry in the “Project/Accomplishment Title” field?
 - Individual names should NOT be part of the “Project/Accomplishment Title”
- ☐ Is there an entry in the “Organization, Activity, or Station” field?
 - Address Line 1
 - Address Line 2
 - City
 - State
 - Zip Code
- ☐ Is there a selection in “Individual/Team” field?
- ☐ Is the “Individual Nominee/Team Leader” field complete?
 - Rank/Grade (e.g. SES/CAPT/GS-11/SSgt)
 - Full Name
 - Title (e.g. Dr/Ms/Mr)
 - Phone Number
 - Email Address
- ☐ Are the team members listed with a brief description in the “Team Details” field?
 - Blank, If individual
 - Title (e.g. Dr/Ms/Mr)
 - Rank/Grade (e.g. SES/CAPT/GS-11/SSgt)
 - Full Name
 - Short 2-3 sentence description
- ☐ Is the “Originator” field complete?
 - Is the originator a current DoD civilian employee or Service member?
 - Grade (e.g. SES/O-3/GS-11/E-6, Do not use titles such as Dr/Ms/Mr)
 - Full Name
 - Phone Number
 - Email Address
 - Is the form digitally signed?
- ☐ Is the “Verifier” field complete?
 - Is the verifier a current DoD civilian employee or Service member?
 - Does the verifier meet the Rank/Grade requirement?
 - Grade
 - Full Name
 - Phone Number
 - Email Address
 - Is the form digitally signed?
- ☐ Is there an entry in the “Innovation Merit” field?
 - Is the entry in Sentence Case?
 - Is the entry less than 450 words?
 - Are all acronyms spelled out?
- ☐ Is there an entry in the “Operational Impact” field?
 - Is the entry in Sentence Case?
 - Is the entry less than 450 words?
 - Are all acronyms spelled out?
- ☐ Is there an entry in the “Executive Summary” field?
 - Is the entry in Sentence Case? (NOT IN UPPERCASE)
 - Is the entry less than 200 words?
 - Are all acronyms spelled out?